

營XPRESS MAIL NO.: EL 984584263 US DATE DEPOSITED: JANUARY 15, 2004

**PATENT** 

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Kropp et al.	)	Atty.	Dkt. I	Vo.	5820.	539
Serial No.:	10/631,168	)					
Filed:	July 31, 2003	)				•	

For: URINARY TRACT TISSUE GRAFT COMPOSITIONS AND METHODS FOR

PRODUCING SAME

Mail Stop - IDS Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450

#### **INFORMATION DISCLOSURE STATEMENT**

## List of Sections Forming Part of This Information Disclosure Statement

The following sections are being submitted for this Information Disclosure Statement:

- 1. [X] Preliminary Statements
- [X] FORM PTO/SB/08A AND 08B (formerly Form PTO-1449)
- 3. **[X]** Copies of Listed Information Items Accompanying this Statement
- 4. [X] Identification of Person(s) Making this Information Disclosure Statement

#### Section 1. Preliminary Statements

Applicants submit herewith patents, publications or other information of which they are aware, which they believe may be material to the examination of this application and in respect of which there may be a duty to disclose.

The filing of this information disclosure statement shall not be construed as a representation that a search has been made (37 C.F.R. § 1.97(g)), an admission that the information cited is, or is considered to be, material to patentability or that no other material information exists.

The filing of this information disclosure statement shall not be construed as an admission against interest in any manner. Notice of January 9, 1992, 1135 O.G. 13-25, at 25.

### Section 2. FORM PTO/SB/08A AND 08B (Modified)

- [X] A completed Form PTO/SB/08A and/or 08B is attached hereto.
- [ ] No Form PTO/SB/08A and/or 08B is attached.

## Section 3. Copies of Listed Information Items Accompanying this Statement.

Legible copies of all items listed in FORM PTO/SB/08A AND 08B (Modified) accompany this information disclosure statement.

- [ ] Exception(s) to above:
  - [ ] Items in prior application from which an earlier filing date is claimed for this application, as identified in Section 3.

## Section 4. Identification of Person(s) Making this INFORMATION DISCLOSURE STATEMENT

The person making this statement is the attorney who signs below on the basis of the information:

- [] supplied by the inventor(s)
- [] supplied by an individual associated with the filing and prosecution of this application (37 C.F.R. § 1.56(c)).
- [X] in the attorney/agent's file

Respectfully submitted,

Kathryn L. Hester, Ph.D.

Reg. No. 46,768

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Agent for Applicants

Express Mail:

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Date Deposited:

01/15/2004

PTO/SB/08A (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Substitute for form 1449A/PTO

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet	1	of	2
		•	i <b>4</b>

Complete if Known				
Application Number	10/631,168			
Filing Date	07/31/2003			
First Named Inventor	Bradley P. Kropp			
Group Art Unit	1615			
Examiner Name	Not Yet Assigned			
Attomey Docket Number	5820.639			

				U.S. PATENT DOCU	JMENTS .	
Examiner Initials*	Cite No.1	U.S. Paten Number	t Document  Kind Code <sup>2</sup> (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant
	AA	5,695,998	(II KNOWN)	Badylak, et al.	12/09/1997	Figures Appear
	AB	5,866,414	<u> </u>	Badylak, et al.	02/02/1999	
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				FORE	IGN PATENT DOCUMENT	rs		
Examiner Initials*	Cite No. <sup>1</sup>	Office <sup>3</sup>	oreign Patent Do	Cument Kind Code <sup>5</sup> (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T⁵
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Examiner	Date	
Signature	Considered	
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<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>&</sup>lt;sup>1</sup> Unique citation designation number. <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

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PTO/SB/08B (08-00)
Approved for use through 10/31/2002, OMB 0651-0031
U. S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Substitute for form 1449B/PTO

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 2 of 2

C mpl te if Kn wn				
Filing Date	07/31/2003			
First Named Inventor	Bradley P. Kropp			
Group Art Unit	1615			
Examiner Name	Not Yet Assigned			
Attorney Docket Number	5820.639			

		OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS	
Examiner nitials*	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
	AC	ZHANG ET AL.; "'Co-Culture' of Bladder Smooth Muscle And Urothelial Cells On Small Intestinal Submococa (sis): Evaluation Of The Best Culture Method For In Vitro Tissue Engineering Techniques"; Pediatrics Journal Supp: Sept., 1999:807-808	
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Examiner	Date	
Signature	Considered	

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>&</sup>lt;sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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Y FO: ERS, RC. DILLAR COULING

PTO/SB/21 (08-00) Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

### **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

10/631,168 **Application Number** 07/31/2003 **Filing Date First Named Inventor** Bradley Kropp, et al. Group Art Unit 1615 Not Yet Assigned **Examiner Name** Attorney Docket Number | \$5820.639

01/15/2004

Total Number of Pages in This Submission		nission	Attorney Docket Number	er <b>T</b> S	5820.639	
		ENC	LOSURES (check	k all th	nat apply)	_
X Fee Transmittal For		Assigni (for an	ment Papers Application)		After Allowance Communication to Group	
Fee Attached	di .	Drawin	g(s)		Appeal Communication to Board of Appeals and Interferences	
Amendment / Reply	1	Licensi	ng-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
After Final		Petition			Proprietary Information	
Affidavits/de	claration(s)	Provision	n to Convert to a onal Application		Status Letter	
Extension of Time F	Request	Addres		X	Other Enclosure(s) (please identify below):	
Express Abandonm	ient Request		al Disclaimer st for Refund	See	remarks below:	
X Information Disclose	ure Statement	CD, Number of CD(s)				
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Response to Missin Incomplete Applicat		1. Transmittal Form (1 page); 2. Fee Transmittal (1 page);				
	Missing Parts	Information Disclosure Statement (3 pages);     Information Disclosure Statement by Applicant (2 pages);				
under 37 CFF	R 1.52 or 1.53	5. Cited Material; an 6. Postcard.	u			
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Individual name	Attn: Kathryn L.	Hester, Ph.D	., P. O. Box 16370, Ok	lahom	a City, Oklahoma 73113	
Signature	denyear					
Date	1-15-04			-		
		CERTIFIC	ATE OF MAILING			$\overline{5}$

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Kathryn L. Hester, Ph.D., Reg. No. 46,768

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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### **FEE TRANSMITTAL** for FY 2004

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** 

(\$) 0

Complete if Known				
Application Number	10/631.168			
Filing Date	07/31/2003			
First Named Inventor	Bradley P. Kropp, et al.			
Examiner Name	Not Yet Assigned			
Art Unit	1615			
Attorney Docket No.	5820.639			

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Check   Credit card   Money   Other   None   Order   None   Order   None   Order   None   Order   None   Order   None	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)	
Deposit Account		3. ADDITIONAL FEES	
Deposit Account Number Deposit Account Dunlap, Codding & Rogers, P.C. Customer No. 30589  The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below   X   Credit any overpayments   1053   130   1053   130   1054   130   1055   130   130   1055   130   1055   130   130   1055   130   1055   130   130   1055   130   130   1055   130   130   1055   130		Large Entity   Small Entity	
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Account Name Customer No. 30589 The Commissioner is authorized to: (check all that apply) Credit any overpayments Charge fee(s) indicated below Code (s) Credit any overpayments Charge fee(s) indicated below, except for the filling feether to the above-identified deposit account.  FEE CALCULATION 1. BASIC FILING FEE Large Entity Small Entity Fee Fee Fee Fee From Fee Paid 1002 340 2002 170 Design filing fee 1004 770 2004 385 Reissue filing fee 1005 180 2005 80 Provisional filing fee  SUBTOTAL (1) (\$\$) 0  2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from Extra Claims Multiple Dependent  Extra Claims below Fee Paid  Total Claims Multiple Dependent  Large Entity Small Entity  Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	Number	I I	- 414
The Commissioner is authorized to: (check all that apply)    Charge fee(s) indicated below   Commissioner   Some personal content   Some personal cont	Account Customer No. 20590	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet	
Charge fee(s) indicated below   Credit any overpayments   1812 2,520   1812 2,520   1812 2,520   1812 2,520   1812 2,520   1804 920   1804 920   1804 920   1804 920   1804 920   1804 920   1804 920   1804 920   1805 1,840		1053 130 1053 130 Non-English specification	
Extra Claims  Substock (1)  Couloge ally additional teets) during the pendency of this application  Charge fee(s) indicated below, except for the filling feether to the above-identified deposit account.  FEE CALCULATION  1. BASIC FILING FEE  Large Entity  Small Entity  Fee Fee Fee Fee Fee Fee Fee Fee Fee Pland  1001 770 2001 385 Utility filing fee  1002 340 2002 170 Design filing fee  1003 530 2003 265 Plant filing fee  1004 770 2004 385 Reissue filing fee  1005 160 2005 80 Provisional filing fee  SUBTOTAL (1) (\$) 0  2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee Fee Pea Fee Fee Fee Fee Fee Fee Fee Fee Fee F		1812 2,520 1812 2,520 For filing a request for ex parte reexamination	
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1. BASIC FILING FEE   Large Entity   Small Entity   Fee			
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Paid  1253 950 1254 1,480 1254 1,480 1255 1,005 1255 1,0	FEE CALCULATION	1251 110 2251 55 Extension for reply within first month	1
Large Entity Small Entity Fee	1. BASIC FILING FEE	1252 420 2252 210 Extension for reply within second month	
Code (\$)	Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month	
1001 770   2001 385   Utility filing fee   1255 2,010   2255 1,005   Extension for reply within fifth month   1401 330   2401 165   Notice of Appeal   1402 330   2402 165   Filing a brief in support of an appeal   1402 330   2402 165   Filing a brief in support of an appeal   1403 290   2403 145   Request for oral hearing   1451 1,510   14		1254 1,480 2254 740 Extension for reply within fourth month	
1003 530	1. 1.	1255 2,010 2255 1,005 Extension for reply within fifth month	
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE    Total Claims	1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from below Fee Paid Independent Claims Independent Claims Multiple Dependent  Large Entity   Small Entity Fee	SUBTOTAL (1) (\$) 0	1452 110 2452 55 Petition to revive - unavoidable	
Total Claims	2 FYTRA CLAIM FEES FOR LITH ITY AND REISSUE	1453 1,330 2453 665 Petition to revive - unintentional	
Total Claims	Fee from		
Independent Claims Multiple Dependent  Large Entity   Small Entity Fee   Fee   Fee   Fee   Fee   Fee   Fee   Code (\$)    1202   18   2202   9   Claims in excess of 20  Large Entity   Small Entity   Sma			
Multiple Dependent  Large Entity   Small Entity Fee   Fee   Fee   Fee   Fee   Fee   Code (\$)    1202   18   2202   9   Claims in excess of 20  Large Entity   Small Entity   Small Entity   Small Entity    1806   180   180   180   180   180    1807   50   1807   50   Processing fee under 37 CFR 1.17(q)  1806   180   180   180   180   Submission of Information Disclosure Stmt    1807   1808   180   180   180   180    1809   770   2809   385   Filing a submission after final rejection	Independent		
Large Entity   Small Entity   Fee Fee   Fee Fee   Fee Description   1807   1806   180   1806   180   Submission of Information Disclosure Stmt   1806   180   1806   180   1806   180   Submission of Information Disclosure Stmt   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   180   1806   1	Claims	1460 130 1460 130 Petitions to the Commissioner	
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1202 18 2202 9 Claims in excess of 20 1809 770 2809 385 Filing a submission after final rejection	Fee Fee Fee Fee Description		
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(3/ CFR 1,129(a))	1202 16 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3		
1203 290 2203 145 Multiple dependent claim, if not paid 1810 770 2810 385 For each additional invention to be	1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be	$\neg$
1204 86 2204 43 ** Reissue independent claims examined (37 CFR 1.129(b))  over original patent 1801 770 2801 385 Request for Continued Examination (RCF)			$\dashv$
over original patent 1801 770 2801 385 Request for Continued Examination (RCE)  1205 18 2205 9 ** Reissue claims in excess of 20 1802 900 1802 900 Request for expedited examination	· ·	to the desired desired and the control of the contr	<b>—</b> ↓
and over original patent of a design application			]
SUBTOTAL (2) (\$) 0 Other fee (specify)	SUBTOTAL (2) (\$) 0		
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0	

SUBMITTED BY (Complete (if applicable) Registration No. Name (Print/Type) Kathryn L. Hester, Ph.D. 46,768 Telephone (405) 607-8600 (Attorney/Agent) Signature Date 01/15/2004